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PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents
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CURRENT CORRESPONDENCE ADDRESS (print; Legibly mark-up with any cancellations or deletions)

Peter A Borsari
Suite 206
2001 Jefferson Davis Hwy
Arlington VA 22202-3603

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

VALESSA BROWN (Depositor's name)
VALESSA BROWN (Signature)
3-17-05 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/04/415	10/15/03	Darius Klakauskas	74.2860	4404

TITLE OF INVENTION:
Natural Shape
Enhancing
Brassiere

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	3/17/05

EXAMINER	ART UNIT	CLASS-SUBCLASS
Hale, Gloria M	3765	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.303).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Peter A. Borsari
2
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee

☐ Advance Order - # of Copies

4b. Payment of Fee(s):

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☒ Payment by credit card. Form PTO-2038 is attached.

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(Authorized Signatory)

(Date)

3/17/05

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PTOL-85 (REV. 05-03) Approved for use through 04/30/2004. OMB 0651-0033

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DATE: March 17, 2005

TO:	Name	Fax No.	Phone No.
	Commissioner for Patents	703-746-4000	703-305-8283

FROM: Vanessa V. Brown for Thomas A. Brackey II, Esq.**NUMBER OF PAGES INCLUDING THIS COVER SHEET:** 3**CASE NAME:** Sheer Shapes Patent Application No. 10/684,415**RE:** Part B - Fee(s) Transmittal and Credit Card Payment Form☐ ORIGINAL/COPY WILL BE MAILED☒ ORIGINAL/COPY WILL NOT BE MAILED**MESSAGE:**

Please find attached the above-referenced documents. Please contact this office, if you have any questions or concerns with these documents as the current patent attorney, Peter Borsari, is on vacation until March 20th 2005.

Thank you.

Vanessa V. Brown
Legal Assistant to T. Brackey II, Esq.

If problems occur, please call our facsimile operator at (310) 247-2165.